

FINAL PROJECT EVALUATION





SUBMIT THIS FORM WITH THE FINAL BILLING AT THE CONCLUSION OF YOUR PROJECT.

Recipient Name:							
Agreement Number:							
	Total crew hours	Supervisor	Miles	# dump sites	Acres	Amount collected	Amou
	corr. other	hours	cleaned	cleaned	cleaned	(use more than one unit, if	

	Total cre <u>corr.</u>	ew hours <u>other</u>	Supervisor hours	Miles cleaned	# dump sites cleaned	Acres cleaned	Amount collected (use more than one unit, if necessary, but do not duplicate)	Amount recycled
Expected outcomes								
Actual outcomes								

What were the goals for the project/s? Describe how well the goals were accomplished.

Explain any problems encountered.

List any change(s) made in the activities outlined in your agreement. Explain why the change(s) were made.

What strategies were successful?

List the community investments that helped to fulfill these accomplishments in the columns below. Estimated values are acceptable.

ContributorWhat was contributed?Unit valueUsageTotal ValueExample: County CorrectionsLitter collection crew\$8/hour4000 hrs\$32,000

What would you change about the CLCP program?